PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) over the lines. is changed) DaVita HealthCare Partners, Inc. Political Action Committee (DaPAC) 32275 32nd Avenue, S. ADDRESS (number and street) (Check if address is changed) Federal Way 98001 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dapac@davita.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.davitaadvocacy.com/ (Check if address is changed) DATE 2014 C00340943 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lin David Whatcott Type or Print Name of Treasurer Lin David Whatcott [Electronically Filed] 02 20 2014 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

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